



Construction Permit Fee Schedule

Department of Public Safety
State Fire Marshal's Office
52 State House Station
Augusta, Maine 04333-0052

Tel: 207-626-3870
Fax: 207-287-6251

Make Check Payable to: "Treasurer, State of Maine"

New Construction

Permit Fee

\$.05/ square foot of occupied space
\$.02/ square foot for bulk storage occupancies

Renovations exceeding 80% of occupied space are considered to be new construction.
Public schools, (K-12), follow the renovation fee schedule below.

Renovations

Permit Fee

Construction Cost

\$25.00.....	For under.....	\$10,000.00
\$50.00	From	\$10,000.00
	but less than	\$20,000.00
\$75.00	From	\$20,000.00
	but less than	\$50,000.00
\$100.00	From	\$50,000.00
	but less than	\$100,000.00
\$150.00	From	\$100,000.00
	but less than	\$500,000.00
\$200.00	From	\$500,000.00
	but less than	\$1,500,000.00
\$250.00	From	\$1,500,000.00
	but less than	\$2,250,000.00
\$350.00	From	\$2,250,000.00
	but less than	\$3,000,000.00
\$450.00	From	\$3,000,000.00

Title 25 Section §2450

\$50.00.....For a Plan Review to acquire only an **Approval Letter**.

(This may be obtained only when a permit is not required by the State.)

(8-23-04)

Tel: 207-626-3880
Fax: 207-287-6251



Application for Construction Permit

Department of Public Safety
State Fire Marshal's Office
45 Commerce Drive, Suite 1
Augusta, Maine 04330-7889

Project Information

Project Name: _____
Street Location: _____ Town Location: _____
County: _____ Zip Code: _____

Project

New Building ☐
Renovation ☐
Addition ☐
Occupancy Change ☐

Sprinkler System

No Sprinkler System ☐
Sprinkler System ☐
Supervised Sprinkler System ☐

Fire Alarm

No Fire Alarm ☐
Fire Alarm ☐
Monitored Fire Alarm ☐

Number of Stories

Original # of Stories _____
Affected # of Stories _____
Total # of Stories _____

Square Footage

Renovated Square Footage _____
New Construction Sq Footage _____
Total Square Footage _____

Project Information

Projected Cost _____
Projected Start Date _____
Projected End Date _____

Building Use Layout

Single Use ☐

Separated ☐

Mixed ☐

Disc Included:
Fee _____ ☐ Yes ☐ No

Apartments ☐
Hotel / Motel/ Dormitory ☐
Rooming & Lodging ☐
Healthcare ☐
Ambulatory Health Care ☐

Occupancy Classification

Business ☐
Residential Care Large ☐ Small ☐
Assembly >1000 ☐ >300<1000 ☐ <300 ☐
Mercantile A ☐ B ☐ C ☐

Educational ☐
Daycare ☐
Detention ☐
Industrial ☐
Storage ☐

Construction Type

Fire Resistant: Type I, (443) ☐ (332) ☐ Unprotected Ordinary: Type III (200) ☐
Protected Non-Combustible: Type II (222) ☐ (111) ☐ Heavy Timber: Type IV (2HH) ☐
Unprotected Non-Combustible: Type II (000) ☐ Protected Wood Frame: Type V (111) ☐
Protected Ordinary: Type III (211) ☐ Unprotected Wood Frame: Type V (000) ☐

Addresses

Owner's Name: _____ Telephone: _____ Fax: _____
Mailing Address: _____
Town: _____ State: _____ Zip Code: _____

Design Professional: _____ Telephone: _____ Fax: _____
Maine Registration Number: _____ E-mail: _____
Mailing Address: _____
Town: _____ State: _____ Zip Code: _____

Signature of Applicant: _____

Preliminary Approval: ☐ Date: _____ Approved By: _____
Construction Permit: ☐ Date: _____ Approved By: _____
Approval Letter: ☐ Date: _____ Approved By: _____
-When a permit is not required

DATE PLANS
RECEIVED

REVIEW FEE

DATE FEE
RECEIVED

CHECK #

PLAN REVIEWER

DATE PERMIT
ISSUED

PERMIT #